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ABSTRACT

The notion of participation of people in their own development has been increasingly gaining momentum as a means of human empowerment and development. Many development scholars and experts have argued that people are the real source of information in their own development, and that their participation is essential across all phases of a development project: planning, implementation, and evaluation. Despite this, many development projects still adhere to donor or program-oriented accountability that largely ignores people's participation in all or most of these phases. This paper, based on field work data collection and analysis of villagers' perceptions of nutrition development communication projects in Nepal, reveals that villagers strongly reject conventional one-way expert-dominated communication, and prefer and support a two-way dialogical participatory communication paradigm. The data collection in the article was undertaken in three districts in which nutrition projects were being conducted; these represented three distinctive ecological zones in Nepal: Nawalparasi (plain areas), Gorkha (hill), and Ramechhap (high hill). The paper also reveals villagers' strong preference for group discussion as a means of facilitating two-way participatory dialogues between a project and villagers in enhancing nutritional well being. Contains 7 notes, 7 tables of data, and 22 references. (NKA)

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Participatory communication as an alternative paradigm for nutrition communication in Nepal

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Abstract

The notion of participation of people in their own development has been increasingly gaining momentum as a means of human empowerment and development. Many development scholars and experts have argued that people are the real source of information in their own development, and that their participation is essential across all phases of a development project : planning, implementation and evaluation. Despite this, many development projects still adhere to donor or program-oriented accountability that largely ignores people's participation in all or most of these phases. This article, based on field work data collection and analysis of villagers' perceptions of nutrition development communication projects in Nepal, reveals that villagers strongly reject conventional one-way expert dominated communication, and prefer and support a two-way dialogical participatory communication paradigm. This article also reveals villagers' strong preference for group discussions as a means of facilitating a two-way participatory dialogues between a project and villagers in enhancing nutritional wellbeing.

Background

In assessing the contribution of communication to human empowerment and development, many communication and social scholars (see, for example, Chu, 1988, Hornik, 1988, Serveas and Arnst, 1992, and Nair and White, 1994) strongly believe that the modernisation paradigm developed in the 'Western model' of expert dominated communications, be it mass media or other forms of communication, is not helpful to empower people of the developing world. Many critics believe that this model is merely a

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'smokescreen' for a 'new style of colonialism' or 'cultural imperialism' (Stevenson, 1988: 4). While criticising this model and recognising the need for developing a different model of communication suitable to the development context, development and communication scholars such as Serveas and Arnst (1992), Hornik (1988), and Hedebro (1979) have urged the necessity of viewing communication differently and in a manner that can enable it to foster mass mobilisation and development. They have argued for a conceptualisation of communication not as a linear process (one-way, vertical communication) dealing with transfer of information from source to receiver as prescriptions for development problems, but as a two-way process of sharing information by entering into dialogues between the parties involved in development. To achieve this, it can be argued that contemporary communication in a developing societal context should be viewed as something requiring a transactional paradigm of communication that involves participatory approach to human communication for their empowerment and development.

Transactional Paradigm

The transactional paradigm views communication as a transactional relationship: 'people simultaneously assume roles in relation to each other and the roles they assume determine which behaviours are to be interpreted as messages and what the messages mean within the context of those roles (Ruesch and Bateson in Smith and Williamson, 1985:13). In this paradigm, communication is characterised as a dynamic and continuous process of shifting roles of senders and receivers, and the communicative actions, therefore, become a never ending process (Windhal et al, 1993: 85, Myers and Myers, 1988:21-22). Myers and Myers (1988:19) contend that this process helps to achieve a better prediction of outcomes: 'the more you talk with people, the better guesses you can make about how they will behave'. In this process of communicative actions or transactional dialogues, a communicator becomes 'both cause and effect, stimulus and response, sender and receiver' (p22). Similarly, Meerloo (1967:131) considers communication itself as transactional, defining it as 'a cluster of transactional functions whereby a state of body and mind is conveyed from one person to another, and

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responses evoked' or as Nair and White (1987 in Rahim,1994:130) describe 'a dialogue, wherein sender and receiver of messages interact over a period of time to arrive at shared meanings'. Barnlund's transactional model (1970:83-102) and Rogers' and Kincaid's convergence model (1981: 63-66) are the best examples of communication as being 'sharing meanings' for 'mutual understanding' rather than as 'effect-oriented'. Nair and White (1994:155), discussing the Rogers and Kincaid model, affirm that communication should be viewed as 'a two-way process of convergence, rather than a one-way, linear set in which one individual seeks to transfer a message to another'. Hence, communication can be perceived, by and large, as a participatory process in which parties involved in sharing of information or messages enter into active transactional, two-way, dialogues between/among themselves in order to reach mutual understanding through the communication process.

Participatory Communication

Participatory communication, a two-way process involving active transactional dialogues, can be conceptually related to the concept of 'self-awareness-raising through collective self-inquiry and reflection' (Rahman, 1991:17). Such a concept, according to Rahman, is derived from 'conscientisation' involving action and reflection, a notion developed by Paulo Freire (1989). Similarly, communicative action that involves verbal and non-verbal interaction to reach an understanding (Habermas 1984) also provides theoretical grounds for participatory communication. In line with this, Bordenave (1994:42) defines participatory communication as:

> ..a type of communication in which all the interlocutors are free and have equal access to the means of expressing their viewpoints, feelings, and experiences. Collective action aimed at promoting their interests, solving their problems, and transforming their society, is the means to an end.

Serveas and Arnst (1992:18), viewing communication as essentially a participatory process, contend that in order to make communication more effective in human empowerment and development participation of the audiences in communication processes is essential as they are often the most qualified sources of information to decide what information can and should be communicated at the local level based on the relevant cultural issues. They uphold that:

> Behavioural responses to planned messages is not participation; neither is it a strategy to make the target audiences feel more involved... striving for behaviour change is a means to an end, but should not be confused with participatory methods' (p.19-20).

Aubel (1991:10) also argues that communities as the audiences are the source of information regarding their 'self-identified needs, priorities, and constraints'. Thus, participation of communities may be very important in a sense that 'people' (audiences/communities) are the 'ultimate and perhaps the most important beneficiary of the development communication policies and planning' (Keune and Sinha, 1978: 36). White and Maloney's research on promoting healthy lives (1990: 224-230), for example, reveals that 'most of the health messages of the past appear not to have shaken the deeply held belief of the hard-to-reach Americans'. Hence, these people consider chronic problems, such as heart disease, cancer and diabetes as largely related to fate and heredity. To deal with these problems, White and Maloney (p.230) suggest there is a need for audiences' participation in acknowledging 'the interplay of biological risk factors, such as family history, with behavioural risks factors, that is , diet, exercise and weight control in the design of health messages'. Similarly, Aubel's field studies (1991) on 29 vitamin A projects in various developing countries reveal that those projects based entirely on a 'social marketing approach'[1] do not produce 'dietary improvement in the primary target groups'. These studies indicate that the social marketing approach may have failed to promote people's participation and 'often focused on the one-way dissemination of motivating messages' (p.9).

A Case Study : Nutrition Communication in Nepal

Bearing in mind the theoretical proposition of the importance of transactional dialogues involving a participatory strategy to communication, a case study on nutrition communication was carried out in Nepal (Khadka, 1997). A focus of the study was to understand the perceptions of villagers on the notion of participatory communication for their nutritional health development. A field survey was carried out over eight months in three districts of Nepal during 1994. The ensuing discussions briefly elaborate on the study methodology before discussing the findings of this field study.

Study Method

A total of three separate districts in which nutrition projects were being conducted were selected for the study. These represented three distinctive ecological zones in Nepal: Nawalparasi (plain areas), Gorkha (hill), and Ramechhap (high hill)[2] (see Table 1). 67 households in each district (i.e. 201 households in total) were selected for survey interviews using random sampling techniques. Questionnaires with open and closed ended questions were used in the household interviews. In each household both male and female adults responsible for the household management were interviewed giving a total of 402 household survey respondents (see Table 2). Additionally, a focus group was carried out in each survey district after the completion of the household field survey. It was expected that the number of participants in the focus group in each survey district would be 10 to 15, the actual number, however, was more than double of what had been expected in each survey district.

Table 1: Demographic Information on Survey Districts

District	Ecological Belt	Population (1991 Census)	Literacy (%)	Mainstay
Nawalparasi	Terai (Plain Area)	436,217	40.0	Agriculture
Gorkha	Hill	252,524	43..3	Agriculture
Ramechhap	High Hill	188,064	30.0	Agriculture

20 community leaders, including political leaders, school teachers, local volunteers, and project workers from the local village development committees (VDCs) were also interviewed (see Table 3). All those community leaders interviewed were involved

[1] The social marketing approach was developed in the 1960s (Nair and White, 1994:159) with the marketing principles of product, price, promotion and place, and is aimed at tackling particular health problems. (Wallack,1990:155; McKee 1994:196).

[2] The terai belt is the low flat land areas (plain areas) of Nepal that run from east to west along the southern side of the country. Hill areas, on the other hand, are situated in the middle of the country with varying altitudes of 610 to 4877 meters above sea level, while mountain areas lie in the northern part. It is in the mountain areas that the highest peak of the world, 'Sagarmatha' or 'Mount Everest' is found (CBS, 1993: i-ii).

Table 2: Demographic Information on Household Sample Population Surveyed[3]

	Nawalparasi (%) n = 134	Gorkna (%) n = 134	Ramechhap (%) n = 134	All Districts (%) n = 402
Age:				
Less than 25	17.2	32.8	17.2	22.4
25-29	28.4	20.1	14.9	21.1
30-34	26.9	15.7	17.2	19.9
35-39	9.7	14.9	24.6	16.4
40 & Over	17.9	16.4	26.1	20.1
Sex:				
Male	50	50	50	50
Female	50	50	50	50
Caste:				
Brahmin	18.7	18.7	0.7	12.7
Chhetry	8.2	16.4	10.4	11.7
Baishya	60.4	59.0	86.6	68.7
Shuddra	9.0	3.7	2.2	5.0
Other	3.7	2.3	0	2.0
Religion:				
Hindu	95.5	52.2	68.7	72.1
Buddhist	2.2	0	31.3	11.2
Islam	2.2	0	0	0.7
Christian	0	47.8	0	15.9
Occupation:				
Professional/Technical	6.0	8.2	0.7	5.0
Administrative/Clerical	2.3	0.7	0.7	1.2
Business workers	8.3	2.2	0.7	3.7
Farm workers	48.9	79.1	86.6	71.6
Production Labourers	9.0	0.7	1.5	3.7
Other	25.6	9.0	9.7	14.7
Education:				
University level	6.7	3.7	0.7	3.7
High school/Sec. School	17.2	7.5	3.0	9.2
Primary/Elementary	30.6	23.9	23.1	25.9
No education	45.5	64.9	73.1	61.2
Marital status:				
Married	98.5	100	99.3	99.3
Other	1.5	0	0.7	0.7
Number of children from 0 to 5 years:				
0 to 1yr.	47.0	61.2	40.3	49.5
2 -5 yr.	53.0	38.8	59.7	50.4
House structure:				
Stone/Brick	62.7	24.6	99.3	62.1
Wooden	37.3	75.4	0.7	37.8
Household Commn. Appliances:				
Radio	52.2	54.4	52.2	53.0
Television	9.0	0.7	0.7	3.5

[3] Information based on the field survey data.

Table 3: Community leaders in survey interviews in Nawalparasi, Gorkha and Ramechhap by sex and social/professional status

	Political Leader		School Teacher		Social Worker/ Volunteer		Total
District	Male	Female	Male	Female	Male	Female	
Nawalparasi	3	0	3	0	0	3	9
Gorkha	2	0	2	0	0	3	7
Ramechhap	3	0	0	0	0	1	4
Total	8	0	5	0	0	7	20

in the survey projects in various capacities, such as field workers, grass roots communicators and trainees.

In the household survey questionnaire and focus groups, many of the questions were directed particularly towards the villagers' familiarity with the project, participation and communication in the project's activities, and perceptions towards the participatory communication. All the data and information so gathered were analysed primarily qualitatively.

Though the three nutrition projects surveyed across the three districts were designed and implemented by different organisations, their main aim and objective were similar. The main aim of each was to address vitamin A-related problems, and to achieve this, the main objective was to inform and educate the target groups using project activities and information (see Table 4). In informing and educating target groups, all the messages in all three survey projects were pre-designed without involving the local people's participation. Target audiences were simply the recipients of project information and education, and at times they received tangible goods from their project, such as vitamin A capsules, seeds and seedlings of vitamin A-rich fruits and vegetables. In Nawalparasi and Gorkha some local women volunteers were engaged in project activities. Their responsibility, however, was limited to dissemination of project pre-designed messages and information. As a consequence, they worked more like project employees than local people's representatives for the project they were involved in.

Table 4 : Summary of the Nutrition Projects Surveyed

Survey Project District	Program/ Project Coverage and Main Focus Area	Project Target Group (s)	Main Project Activities	Main Project Communicators and Modes of Communication used in the Field	People's Participation and Communication Strategies	Program Impact on Nutrition
Nawalparasi (an on-going project)	12 Terai Districts[4]. Vitamin A deficiency control.	Children of 6 months to 5 years, and pregnant and lactating mothers.	Distribution of vitamin A capsules, nutrition education, and training of people involved in carrying out the program.	Main communicators: Female community health volunteers, HP staff, teachers/students, and social workers. Main modes of communication: one-to-one, posters/ pamphlets, and radio.	Local village women's involvement in project information dissemination. Communication based on one-way pre-designed messages.	No formative evaluation was made until 1994 except for some on the numbers of people trained and vitamin A capsules distributed.
Gorkha (1990-1993)	1 District (in 2 VDCs). Vitamin A deficiency control.	All households in general, and school children and women in particular.	Formation of mothers' groups, training /workshops for people involved in program implementation, kitchen gardening, and school activities.	Main communicators: Women volunteers, mothers' groups, and school teachers and students. Main modes of communication: one-to-one and group discussion, radio, posters and pamphlets, audio tapes, video and folk singers.	Local village women's participation in information dissemination. Communication strategy based on centrally-designed information.	It was believed that the rate of night blindness was reduced from 1.7% to 1% among school children.
Ramechhap (on-going)	49 Districts[5]. Vitamin A deficiency control.	Rural women below the poverty line.	Income generation, non-formal functional education, mobilisation of local resources, child development and mother and child nutrition.	Main communicators: Women workers (Govt. field workers), and women's groups. Main modes of communication: one-to-one and group discussion, radio, and posters and pamphlets.	Local women's participation in discussions concerning the group activities supported by the project. Communication strategy based on centrally-designed information.	Up until 1993, the program was found to be effective in providing some benefits to its beneficiaries, such as the distribution of loans, implementation of skills development training, literacy and family welfare.

[4] Figures included up to 1994.
[5] Figures included up to 1994.

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Participatory Experience

All the survey districts reported some level of participatory experience in the respective project (see Table 5). Ramechhap recorded the highest level of participation in the project by the target beneficiaries, while the target beneficiaries of Nawalparasi had the lowest levels of participation in the project. Gorkha was second to Ramechhap in terms of participation in the project. However, in all three of the survey districts, all of the respondents reported that they had had only 'partial' participation in the district project. The 'partial' participation in this context was their involvement only in one part of

Table 5 : Levels of Project in 3 Districts

	Level of participation *Observed Frequency* Expected Frequency (% of Observed Frequency)	
Districts	Partial	None
Nawalparasi	5 62.4	129 71.6
	(3.7)	(96.3)
Gorkha	99 62.4	35 71.6
	(73.9)	(26.1)
Ramechhap[6]	52 31.2	15 35.8
	(77.6)	(22.4)
n	335	

the implementation phase of the project in which they received nutrition and adult education, vitamin A capsules and seeds, and seedlings of vitamin A-rich vegetables and fruits. This means that they were not involved in the process of planning most of the implementation or evaluation of the project, but were simply the recipients of goods and services of the nutrition activities of the project.

It is evident from Table 5 that there were comparatively less villagers reporting participation in the project in Nawalparasi. It was evident from the focus group discussions that the low level of participation in this project was largely due to a lack of communication with the villagers. Most focus group participants stated that they had not known anything about the activities of the project and that the project had done nothing

[6] As in other two districts, both household male and female in Ramechhap also were interviewed. However, as the survey project in Ramechhap involved only females as its target group, only female participation has been included in this table.

for their village. One of the participants of the focus group recalled the lack of proper information about the project:

> .. just a few months before this survey, I was as usual returning to my home from my work at around six p.m . Shortly before reaching my village, I saw some people gathering in one Chautary (public place). I then out of my curiosity joined the gathering and asked what was happening there. With great surprise, I finally came to know that all of them who were gathered there expected to see the vitamin A project people who were supposed to come there and distribute money to provide assistance to the poor children. However, at the end of the day, on the contrary, their hopes were shattered by the project people who instead of distributing money just informed them about the date of vitamin A capsule distribution to the needy children. What an incredible mess in the project information system !

This suggests that there was a problem in project communication with the villagers , no matter whether this particular incident was caused unintentionally by the project itself or by someone unrelated to the project activities or team.

In the focus group interview in Gorkha, participants gave different reason for not participating in the project. For example, one respondent in the focus group asserted:

> Though the project tried to impart knowledge about green vegetables and yellow fruits, the way it was working was not good enough to stimulate participation in the project activities. The main problem was that those women and men who received training from the project did not share their knowledge with other fellow villagers. Actually, they were sent to the training so that they would impart their knowledge to the villagers when they come back home. But it did not happen. They could not be bothered sharing the knowledge they received from the training.

The above statement suggests that there was a problem of knowledge and information-sharing in the project. Many focus group participants remarked on this situation as an inhibiting factor to people's participation in the project. One of the participants added that the training program of the project was a waste of time: 'those who received training just ate up the training allowance and that was only the fulfilment of their vested interest, which refers to their monetary interest'. On the other hand, a male participant, who happened to be one of the recipients of the training commented:

> It is true that we received training and acquired new knowledge, but it is not that we did not try to share our knowledge with others. Everybody would agree that we are also a part of this village life, that we also have many commitments to maintain our lives like other villagers. Thus, we do not have sufficient time to go to each person's house to share our knowledge. Instead why don't people who wish to acquire knowledge come to our home and ask us to share our knowledge with them? I think it is the rational way in that it saves us time and energy in going to each individual's house while it is not a big deal for someone from a household to spend some time and energy with us.

But many other participants did not share this view and responded: 'If you cannot go to each individual house, why don't you ask the villagers to be assembled in a group to listen to you?' This problem could have been avoided had the project staff consulted the community members during the project's design and development phase.

Some focus group participants in Ramechhap were more concerned about villagers' lack of participation in their village development. In this regard, one of the participants, recollecting the traditional ways of community participation in the village until thirty or forty years ago, stated:

> Our fathers used to assemble in the village if there was a serious problem to be dealt with. For example, if there was an outbreak of cholera, they used to meet and decide on some measures to fight the problem. For example, they used to prohibit people from going to cholera-infected areas or from getting into close contact with the victims of cholera. They used to hang a stone at the border of a village or house where the epidemic had struck. Now such things do not happen. No one bothers to resolve village problems with mutual discussions.

However, despite the above statement, many participants strongly believed that the survey project in Ramechhap had provided some experience of voluntary participation in their development compared to the forced participation they had experienced for many years in government development projects, such as in local road or building constructions. However, most of them considered that the project surveyed had not provided the opportunity for villagers to be involved in the decision-making processes of the project. As one of the focus group participants asserted:

> Development should not occur by force through the program or project, rather it should occur through a joint undertaking between the program and the local people, because we villagers are not just puppets with which you can play around as and when you wish.

Field inquiries with one of the senior staff members of the project at the central level reveal that the survey project in Ramechhap did lack inclusion of people in the decision making process right from the beginning of the project formulation to evaluation. This staff member stated that this problem is not unique to this particular project situation, but is a national problem in Nepal, where a crisis of confidence between villagers and project developers has been created.

Perceptions about Participatory Communication

Despite the participation of people in each survey project being at the 'partial' level in all three districts, there was a high degree of support for the idea of including local people and consulting with them in all the phases and aspects of communication of the nutrition projects. For example, 94% of the respondents in Ramechhap, 88.1% in Gorkha and 85.8% in Nawalparasi favoured the inclusion of the villagers' opinions and their participation in the design and dissemination of nutrition information (see Table 6). In addition, all the focus group participants and community leaders in all three of the survey districts supported the need for consultations with villagers and their participation in nutrition projects and communication if the latter were to be effective.

Table 6 : Views Regarding the Design, Development, and Dissemination of Information

	Views regarding design, development & dissemination of information *Observed Frequency (%)*	
Districts	Health and nutrition information should be designed and disseminated by the experts alone as the local people do not have any expertise in this field	Local people's opinion and participation should be included in the design and dissemination of information as I believe that the local people are also experts of local conditions and traditional practices
Nawalparasi	19 (14.2)	115 (85.8)
Gorkha	16 (11.9)	118 (88.1)
Ramechhap	8 (6.9)	126 (94.0)

One of the striking examples of the importance of consultations with the villagers was highlighted by a female participant in the focus group in Ramechhap:

> Look, though the sisters (female program workers) of the project have done a very good job for us, they could not actually function very well in the first year of their work. The main reason was that they did not bother to discuss their activities with the people of all the wards of this village. As a result, their activities became limited to only some of the wards of this village, such as wards 1, 2 and 3 only, and none of the members of the rest of the wards were interested in their activities. A year later, they realised the necessity of the participation of these wards, thus they invited representatives (one male and one female) from all these wards to discuss their participation in their activities. It was good that they did discuss with the villagers eventually; otherwise, it would have been very difficult for them to work in this village.

This example strongly upholds the need for a project to have a transactional dialogue with the village people; and that consultations to be initiated from the project itself as the village people do not necessarily come forward to negotiate with the project staff unless they are approached by the latter to discuss matters of interest to them.

All the community leaders in Ramechhap felt that the villagers should be consulted on information design and dissemination. They considered that such consultations would be potentially beneficial to the design and dissemination of effective information:

> In consultation, the villagers can give their own suggestions in regard to effective communication. For example, they can suggest what language should be used, and indicate the preferences and traditions of the local audiences in the design and dissemination of the information.

Many focus group participants and survey respondents of Gorkha district believed that consultations provide an opportunity for the villagers to know about the project and also to take part in it. Seemingly, some community leaders interpreted consultations with the villagers as a means of gaining their participation in the project: 'consultations can give the villagers the impression that they are also involved in the project processes of their own benefit, so that they will feel obliged and behave accordingly'. In contrast and rejecting the conventional method of top down expert dominated information dissemination, one of the focus group participants asserted that:

> We definitely need help, but any help should be in co-ordination with the villagers. This means the experts or project people should tell us what they are going to do for us and, at the same time, they should listen to us what we say and what we feel about them and expect of them. This will help us exchange ideas and feelings that are necessary for reaching any conclusions. This is needed since only mutual Co-operation and the exchange of ideas can lead us to success. This is true, just as we all know that every little drop of water makes an ocean.

The above views illustrate the villagers' preference for co-operation between those who give external help and themselves.

A majority of respondents and focus group participants in Nawalparasi believed that consultations can help villagers to interact with the development project and know its aims and potential benefits for the villagers. In line with this, one of the focus group participants commented, 'before the implementation of the project we should be given an

opportunity to know what the incoming project is all about so that we have a say in the proper implementation of the project'. Referring to nutrition projects, many focus group participants, especially women, emphasised that they should be consulted before the implementation of any nutrition project as they strongly believe that they are the main people responsible for household nutrition. They indicated that if, after consultations, they find the project feasible for them, they may well be ready to give their valuable time to project activities. As one women put it:

> We need to be gathered for a group discussion to discuss the proposed project, and once we are determined or have decided to go ahead with the project we should be given two to three weeks training on the project activities, but the training should not be longer than two to four hours a week to avoid interruption of our domestic work.

One of the focus group participants in Nawalparasi, who considers nutrition projects essentially as educational, emphasised that knowledge dissemination should not be a monopolistic process; rather it should involve the other end of the process: '..spreading knowledge should not be limited to 'ek-horo bichär' ('one-sided thought or judgement')[7]. We should try to actively involve the other end in this process'. In order to involve the other end, in this context the local villagers, in a nutrition project, a majority of the respondents, including the focus group participants and community leaders in each survey district, preferred group discussions or meetings (Table 7). Most

Table 7 : Preferred Methods of Consultations

	Preferred methods of consultation (n = 359) *Frequency (%)*			
Districts	Being invited to a group meeting	Being a member of a consultative committee	Having interpersonal discussions	Consulting with someone who puts forward the views of the villagers
Nawalparasi	87 (75.7)	5 (4.3)	22 (19.1)	1 (0.9)
Gorkha	95 (80.5)	6 (5.1)	11 (9.3)	6 (5.1)
Ramechhap	109 (86.5)	6 (4.8)	4 (3.2)	7 (5.6)

*Number representing those respondents who favoured consultations

of them believe that group discussions or meetings can give every interested villagers or

community members an equal opportunity to participate in the project discussions. They believe that such an opportunity helps create the conducive environment necessary for bringing about interactive and fruitful dialogues between project staff and villagers. In this view, most of the focus group participants, especially in Gorkha, exhorted that any development project, be it nutrition or health, should not go to the village directly through the local political leaders. They strongly believe that the local political leaders always patronise villagers and thus prohibit ordinary people from open dialogues and discussions with the project staff.

Conclusion

The case study presented in this paper has basically revealed the fact that villagers studied in Nepal totally reject the conventional method of expert dominated one-way communication in their nutritional development. They strongly believe in a two-way participatory communication which is very close to the notion of modern communication scholars and experts who view communication essentially as transactional and participatory processes thereby involving audiences as partners of communication, especially in human empowerment and development.

This study also revealed that the villagers surveyed asserted group discussions or meetings as the best forms of enhancing two-way participatory dialogues. Unfortunately, as in this case study, it is frequently observed that most development projects even in these recent times are developed and implemented with a traditional approach of pursuing donor or program oriented goals and objectives which eventually fail to initiate a two-way participatory dialogues, discussions or consultations with local people who the development is meant for. This may well account for why many development projects achieve little of what had been expected.

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[7] 'Ek-horo bichär' in English is 'one-sided thought or judgment', which has been described by Turner (1996: 58 & 440) as one -dimensional or obstinate thought or judgment.

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